Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued ire identification (for nple, your driver's	Theresa First name Elaine	First name
	licen	se or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Davis Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of Social Security ber or federal vidual Taxpayer tification number	xxx-xx-0196	

Debtor 1 Theresa Elaine Davis

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	24418 Verdant Dr.	If Debtor 2 lives at a different address:
		Farmington Hills, MI 48335 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Oakland	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ C	hapter 7				
		□ с	hapter 11				
		□ с	hapter 12				
		□ C	hapter 13				
3.	How you will pay the fee		about how yo	u may pay. Typi attorney is subm	cally, if you are paying the fee yo	k with the clerk's office in your local court for more deta burself, you may pay with cash, cashier's check, or mo alf, your attorney may pay with a credit card or check v	
						on, sign and attach the Application for Individuals to Pa	
			•		(Official Form 103A).	n only if you are filing for Chapter 7. By law, a judge ma	
		Ц	but is not req applies to yo	uired to, waive your family size and	our fee, and may do so only if yo d you are unable to pay the fee ir	n installments). If you choose this option, you must fill ocial Form 103B) and file it with your petition.	
	Have you filed for bankruptcy within the last 8 years?	■ No					
	iast o years:	⊔ те	s. District		When	Case number	
			District		When	Casa susahas	
			District		When	Case number Case number	
			2.0	_			
D.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
1.	Do you rent your	■ No	Go to I	ine 12.			
	residence?	☐ Ye	s. Has yo	ur landlord obtai	ned an eviction judgment agains	it you?	
				No. Go to line 1	2.		
				Yes. Fill out <i>Init</i> this bankruptcy		Judgment Against You (Form 101A) and file it as part of	

Case number (if known)

Debtor 1 Theresa Elaine Davis

Jer	ineresa Elaine Da	ivis		Case number (ir known)		
⊃ar	t 3: Report About Any Bu	ısinesses	You Own	as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name and location of business			
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code		
	it to this petition.		Check	the appropriate box to describe your business:		
				Health Care Business (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defined in 11 U.S.C. § 101(53A))		
				Commodity Broker (as defined in 11 U.S.C. § 101(6))		
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am n	ot filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am fi	ling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
•ar	t 4: Report if You Own or	Have Any	/ Hazardo	us Property or Any Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	□ Yes.	What is t	he hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?		
	•			Number, Street, City, State & Zip Code		

Debtor 1 Theresa Elaine Davis

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Theresa Elaine Da	ıvis		Case number (if known)			
Par	t 6: Answer These Questi	ions for Re	porting Purposes				
16.	What kind of debts do you have?	16a.		nsumer debts? Consumer debts are definal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		siness debts? Business debts are debts tment or through the operation of the bus			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you ow	re that are not consumer debts or busines	ss debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		o you estimate that after any exempt propilable to distribute to unsecured creditors	perty is excluded and administrative expenses ?		
	administrative expenses		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you	■ 1-49		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000		
	owe?	☐ 50-99 ☐ 100-19 ☐ 200-99		10,001-25,000	☐ More than100,000		
19.	How much do you estimate your assets to	S \$0 - \$5		□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion		
	be worth?	□ \$100,0	01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$50 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$10 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	to be?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50.000.001 - \$100 million	\$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Par	t 7: Sign Below						
or	you	I have exa	amined this petition, and I decla	are under penalty of perjury that the inform	mation provided is true and correct.		
				I am aware that I may proceed, if eligible, ief available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.		
		If no attor	ney represents me and I did no t, I have obtained and read the	ot pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b).	at an attorney to help me fill out this		
		I request	relief in accordance with the ch	apter of title 11, United States Code, spe	cified in this petition.		
		bankrupto and 3571	cy case can result in fines up to	concealing property, or obtaining money of \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Theresa	esa Elaine Davis Elaine Davis of Debtor 1	Signature of Debto	r 2		
		Executed	on October 21, 2019	Executed on			
			MM / DD / YYYY	MM	I / DD / YYYY		

Debtor 1	Theresa Elaine Davis	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Marshall D. Schultz Signature of Attorney for Debtor	Date	October 21, 2019 MM / DD / YYYY
Marshall D. Schultz P38040		
Printed name		
Law Offices of Marshall D. Schultz		
Firm name		
29777 Telegraph Road, Suite 2203		
Southfield, MI 48034		
Number, Street, City, State & ZIP Code		
Contact phone 248-559-6930	Email address	marshalld.schultz@gmail.com
P38040 MI		
Bar number & State		

Fill in	this information to iden	tify your case:			
Debto		Elaine Davis			
Debto	First Name	Middle Name	Last Name		
	e if, filing) First Name	Middle Name	Last Name		
Unite	d States Bankruptcy Court	t for the: EASTERN DISTRIC	CT OF MICHIGAN		
1	number				
(if knov	<i>m</i>)			_	if this is an ed filing
Offi	cial Form 106S	<u>Sum</u>			
			and Certain Statistical Information		2/15
inforn	nation. Fill out all of your	schedules first; then comple	ople are filing together, both are equally responsible for te the information on this form. If you are filing amend		
	<u> </u>	•	heck the box at the top of this page.		
Part 7	Summarize Your As	sets			
				Your as Value of	sets what you own
1.	Schedule A/B: Property	(Official Form 106A/B)		•	0.00
				\$	0.00
	1b. Copy line 62, Total per	rsonal property, from Schedule A	VB	\$	33,790.00
	1c. Copy line 63, Total of a	all property on Schedule A/B		\$	33,790.00
Part 2	Summarize Your Lia	abilities			
				Your lia Amount	bilities you owe
		o Have Claims Secured by Proped in Column A, Amount of claim	perty (Official Form 106D) o, at the bottom of the last page of Part 1 of Schedule D	\$	32,459.00
		Vho Have Unsecured Claims (Of from Part 1 (priority unsecured c	ficial Form 106E/F) claims) from line 6e of <i>Schedule E/F</i>	\$	0.00
;	3b. Copy the total claims	from Part 2 (nonpriority unsecur	ed claims) from line 6j of Schedule E/F	\$	37,372.10
			Your total liabilities	\$	69,831.10
Part 3	Summarize Your Inc	come and Expenses			
	Schedule I: Your Income (Copy your combined mont		dule I	\$	4,273.47
	Schedule J: Your Expense Copy your monthly expense	,		\$	4,264.00
Part 4	Answer These Ques	stions for Administrative and	Statistical Records		
	•	ptcy under Chapters 7, 11, or g to report on this part of the form	13? n. Check this box and submit this form to the court with yo	ur other sch	edules.
7.	■ Yes What kind of debt do you	u have?			
	Your debts are prim	arily consumer debts. Consum	ner debts are those "incurred by an individual primarily for	a personal,	family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,330.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	5,424.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	5,424.00

	Theresa Elaine	Davis					
	First Name	Middle	Name Last Name	_			
btor 2 ouse, if filing)	First Name	Middle	Name Last Name				
ited States	Bankruptcy Court for the:	EASTERN	DISTRICT OF MICHIGAN				
ase numbe	r				[☐ Check if this is a	
	- 4004/5				1	amended filing	
	Form 106A/B	4					
ched	ule A/B: Pro	perty				12/15	
■ No.	Go to Part 2. . Where is the property?	ole illerest ill a	ny residence, building, land, or similar property? What is the property? Check all that apply	Do not dec	duct secured clair	ms or exemptions. Put	
	ress, if available, or other description	on .	☐ Single-family home	the amoun	t of any secured	claims or exemptions. Put ured claims on Schedule D: laims Secured by Property.	
Oite	State	ZIP Code	☐ Duplex or multi-unit building ☐ Condominium or cooperative	entire pro	alue of the perty?	Current value of the portion you own?	
City	State	ZIP Code	☐ Manufactured or mobile home	\$		\$	
			☐ Land				
			☐ Investment property				
			☐ Timeshare				
			Other	Describe		ur ownership interest	
					ee simple, tenai	ncy by the entireties, c	
			Who has an interest in the property? Check one	(such as f	te), if known.		
				(such as f			
			one Debtor 1 only Debtor 2 only	(such as f			
County			Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	(such as f a life esta	te), if known.	nunity property	
County			one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	(such as f a life estated a life est	k if this is comn	nunity property	
County			Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	(such as f a life estated a life est	k if this is comn	nunity property	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debto	or 1 <u>T</u>	heresa Elaine Dav	is		Case number (if know	n)	
3. Ca	rs, vans,	trucks, tractors, spo	ort utility ve	hicles, motorcycles			
	No						
•	res .						
3.1	Make:	Lincoln		Who has an interest in the property? Check one			ims or exemptions. Put I claims on <i>Schedule D:</i>
	Model:	MKS		■ Debtor 1 only			is Secured by Property.
	Year:	2012		☐ Debtor 2 only	Current value	of the	Current value of the
		nate mileage:	185000	Debtor 1 and Debtor 2 only	entire property	y?	portion you own?
	Other inf	ormation:		\square At least one of the debtors and another			
				☐ Check if this is community property (see instructions)	\$6,5	500.00	\$6,500.00
3.2	Make:	Dodge		Who has an interest in the property? Check one			ims or exemptions. Put I claims on <i>Schedule D:</i>
	Model:	Charger		■ Debtor 1 only			is Secured by Property.
	Year:	2012		Debtor 2 only	Current value	of the	Current value of the
		nate mileage:	112000	Debtor 1 and Debtor 2 only	entire property	у?	portion you own?
	Other inf	ormation:		At least one of the debtors and another			
				Check if this is community property (see instructions)	\$13,0	00.00	\$13,000.00
				n for all of your entries from Part 2, including			\$19,500.00
•	_						
		be Your Personal and I or have any legal or e		ems terest in any of the following items?		C	urrent value of the
50 y.	ou ou c	n nave any legal of e	.quitubic iii	torest in any or the following items.		p o D	ortion you own? o not deduct secured aims or exemptions.
Ex	amples: No	goods and furnishin Major appliances, furn scribe		, china, kitchenware			
		to, sm tools	nall applia and suppl	d goods and furnishings, including but nces, bedding, kitchenware and supplie ies, assorted household tools, furnishin re, lamps, and decorative items of negli	s, cleaning ngs,	_	\$3,300.00
Ex	No			eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners; musi	c collection	ns; electronic devices
	res. De	SCHDE					
		comp	uter(s), tal	electronic devices, including television(s blets, cell phones and assorted chargers			\$1,150.00
		computer(s), tablets, cell phones and assorted chaperipherals.				_	

Official Form 106A/B Schedule A/B: Property page 2

D	ebtor 1 Theresa Ela	ine Davis Case number (if known)	
8.	Collectibles of value Examples: Antiques and	I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or	r baseball card collections:
		ons, memorabilia, collectibles	, 20052an cana concentration,
	Yes. Describe		
_			
9.	musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes an	d kayaks; carpentry tools;
	■ No □ Yes. Describe		
10	. Firearms Examples: Pistols, rifle No ☐ Yes. Describe	s, shotguns, ammunition, and related equipment	
11	. Clothes Examples: Everyday cl No Yes. Describe	othes, furs, leather coats, designer wear, shoes, accessories	
		clothing, shoes and clothing accessories	\$900.00
	Yes. Describe	jewelry	\$500.00
13	. Non-farm animals Examples: Dogs, cats,	birds, horses	
	■ No		
	☐ Yes. Describe		
_			
14	■ No	nd household items you did not already list, including any health aids you did not list	
	☐ Yes. Give specific in	formation	
_			
15		of all of your entries from Part 3, including any entries for pages you have attached number here	\$5,850.00
	o you own or have any	ncial Assets legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□ No	have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
Of	ficial Form 106A/B	Schedule A/B: Property	page 3

Schedule A/B: Property page 3 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com 19-54952-mar Doc 1 Filed 10/22/19 Entered 10/22/19 08:12:51 Page 12 of 60

Debtor 1	Theresa Elain	e Davis		Case number (if known)	
				cash on hand	\$100.00
Examp —			ncial accounts; certificates accounts with the same in	of deposit; shares in credit unions, brokerage houses, astitution, list each.	and other similar
□ No ■ Yes			Institution	name:	
		17.1. checkin		ed funds in bank account located at:	\$40.00
	, mutual funds, or bles: Bond funds, in		stocks s with brokerage firms, mo	oney market accounts	
		Institution	or issuer name:		
9. Non-pu joint vo		ck and interests in	n incorporated and unine	corporated businesses, including an interest in an	LLC, partnership, and
☐ Yes.	Give specific infor	mation about them Name of entity		% of ownership:	
1. Retiren	Give specific inforr	Issuer name:		ngs accounts, or other pension or profit-sharing plans	
	List each account s	separately. Type of account:	Institution	name:	
		401k	retireme	ent account held in trust by employer	\$2,500.00
Your sl Examp ■ No		deposits you have	aid rent, public utilities (ele	entinue service or use from a company ectric, gas, water), telecommunications companies, or on the arms or individual:	others
3. Annuiti ■ No □ Yes		a periodic paymen		or life or for a number of years)	
26 U.S.0 ■ No	C. §§ 530(b)(1), 52	29A(b), and 529(b)	(1).	rogram, or under a qualified state tuition program. the records of any interests.11 U.S.C. § 521(c):	

Schedule A/B: Property page 4 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com 19-54952-mar Doc 1 Filed 10/22/19 Entered 10/22/19 08:12:51 Page 13 of 60

Official Form 106A/B

Debtor 1	Theresa Elaine Davis		Ca	ase number (if known)	
25. Trusts ■ No	, equitable or future interests in	property (other than anything li	isted in line 1), and	rights or powers exerci	sable for your benefit
☐ Yes.	Give specific information about the	nem			
	ss, copyrights, trademarks, trade ples: Internet domain names, webs			s	
	Give specific information about th	em			
Examp ■ No	ses, franchises, and other general ples: Building permits, exclusive lides. Give specific information about the	enses, cooperative association ho	oldings, liquor license	es, professional licenses	
Money or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	funds owed to you Give specific information about the	em, including whether you already	/ filed the returns and	I the tax years	
		pro rated tax refund and 20	019 (if any)	Federal & State	\$5,000.00
■ No	r support ples: Past due or lump sum alimon Give specific information	y, spousal support, child support,	maintenance, divorc	e settlement, property se	itlement
Examp ■ No	amounts someone owes you ples: Unpaid wages, disability insu benefits; unpaid loans you m Give specific information	rance payments, disability benefits ade to someone else	s, sick pay, vacation	pay, workers' compensa	tion, Social Security
Examµ □ No	sts in insurance policies ples: Health, disability, or life insura		A); credit, homeowne	er's, or renter's insurance	
■ Yes.	Name the insurance company of e Company n		Beneficiary	:	Surrender or refund value:
	term life i	nsurance through employer	family		\$0.00

Official Form 106A/B Schedule A/B: Property page 5

De	btor 1	Theresa Elair	ne Davis	Case number (if kno	own) _	
32.	If you			you from someone who has died rust, expect proceeds from a life insurance policy, or are currently entitled to	receive	e property because
- 1	No					
ı	☐ Yes.	Give specific info	rmation			
	Exam			ner or not you have filed a lawsuit or made a demand for payment isputes, insurance claims, or rights to sue		
_	■ No					
	⊔ Yes.	Describe each cla	aim		\neg	
I	■ No	•	•	claims of every nature, including counterclaims of the debtor and righ	ts to se	et off claims
	⊔ Yes.	Describe each cla	aim		\neg	
ı	□ No	nancial assets yo Give specific info		ready list		
				garnished wages		\$800.00
36.				entries from Part 4, including any entries for pages you have attached	I	\$8,440.00
Par	rt 5: De	escribe Any Busines	ss-Related Pro	operty You Own or Have an Interest In. List any real estate in Part 1.		
	. .			Literature Laterature A		
	-	own or nave any leg o to Part 6.	gai or equitab	le interest in any business-related property?		
_	_					
	→ Yes. (Go to line 38.				
						Current value of the portion you own? Do not deduct secured claims or exemptions.
38	Accou	ints receivable or	commissio	ns you already earned		
00.	70000	into receivable of	0011111113310	no you uncuty curricu		
	□ No □ Yes.	Describe				
39.		equipment, furni ples: Business-rela		supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, de	esks, ch	airs, electronic devices
	□ No □ Yes.	Describe				
40.	Machi	nery, fixtures, equ	uipment, su	pplies you use in business, and tools of your trade		
ı	□ No					
		Describe				

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1 Theresa Elaine Davis		Case number (if known)	
41. Inventory			
□ No			
☐ Yes. Describe			
42. Interests in partnerships or joint ventur	es		
□ No			
☐ Yes. Give specific information about the	əm		
Name of ent	ity:	% of ownership:	
		%	
43. Customer lists, mailing lists, or other c □ No.	ompilations		
☐ Do your lists include personally identifiable	e information (as defined in 11 U.S.C. § 101(41A))?		
□No			
☐ Yes. Describe			
44. Any business-related property you did	not already list		
□ No			
☐ Yes. Give specific information			
		_	
	ries from Part 5, including any entries for page		
To Turt of Write that humber here			
Part 6: Describe Any Farm- and Commercial Fill you own or have an interest in farmland,	shing-Related Property You Own or Have an Interest list it in Part 1.	t In.	
46. Do you own or have any logal or equite	ble interest in any form, or commercial fishing	n related preparty?	
No. Go to Part 7.	ble interest in any farm- or commercial fishing	g-related property?	
☐ Yes. Go to line 47.			
_ 130, 00 0			Current value of the portion you own? Do not deduct secured claims or exemptions.
47. Farm animals			
Examples: Livestock, poultry, farm-raised	fish		
□ No			
☐ Yes			
48. Crops—either growing or harvested			
□ No			
☐ Yes. Give specific information			
40. Farm and fighting and	As marking the transport of the transpor		-
49. Farm and fishing equipment, implemen	ts, machinery, fixtures, and tools of trade		
□ No			

Schedule A/B: Property page 7

Official Form 106A/B

Deb	otor 1 Theresa Ela	ine Davis		Case number (if known)	
г	☐ Yes				
_					
50.	Farm and fishing supp	olies, chemicals, and feed			
_	7				
_	□ No □ Yes				
_	□ 165				
51.	Any farm- and comme	rcial fishing-related property you did not	already list		
	•		•		
	□ No				
L	☐ Yes. Give specific inf	ormation			
52.		of all of your entries from Part 6, includir			
	for Part 6. Write that	number here			
Part	7: Describe All Pr	operty You Own or Have an Interest in That Yo	u Did Not List Above		
	2000110071111				
53.	Do you have other pro	perty of any kind you did not already list	?		
	Examples: Season tick ■ No	ets, country club membership			
		ormation			
-	Tes. Give specific info	ormation			
54.	Add the dollar value	of all of your entries from Part 7. Write th	at number here		\$0.00
Part	List the Totals of	Each Part of this Form			
55.	Part 1: Total real est	ate, line 2			\$0.00
56.	Part 2: Total vehicles	s, line 5	\$19,500.00		· · · · · · · · · · · · · · · · · · ·
57.	Part 3: Total persona	al and household items, line 15	\$5,850.00		
58.	Part 4: Total financia	ıl assets, line 36	\$8,440.00		
59.	Part 5: Total busines	s-related property, line 45	\$0.00		
60.	Part 6: Total farm- ar	nd fishing-related property, line 52	\$0.00		
61.	Part 7: Total other pr	operty not listed, line 54 +	\$0.00		
62.	Total personal prope	erty. Add lines 56 through 61	\$33,790.00	Copy personal property total	\$33,790.00
63.	Total of all property	on Schedule A/B. Add line 55 + line 62			\$33,790.00

Fill in this info	rmation to identify yo	our case:		
Debtor 1	Theresa Elaine			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
United States B	ankruptcy Court for th	e: EASTERN DISTRICT C	PF MICHIGAN	_
Case number (if known)				☐ Check if this is an amended filing
Official Fo	orm 106C			
Schedu	le C: The F	Property You C	Claim as Exempt	4/19
the property you	listed on Schedule A/and attach to this page	B: Property (Official Form 106	A/B) as your source, list the property that	ole for supplying correct information. Using you claim as exempt. If more space is any additional pages, write your name and

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Ρá	identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming?	? Check one only, ever	n if yo	our spouse is filing with you.	
	\square You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	usual household goods and furnishings, including but not limited	\$3,300.00		\$3,300.00	11 U.S.C. § 522(d)(3)
	to, small appliances, bedding, kitchenware and supplies, cleaning tools and supplies, assorted household tools, furnishings, ordinary furniture, lamps, and decorative items of negligble value Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
	assorted used electronic devices, including television(s), computer(s),	\$1,150.00		\$1,150.00	11 U.S.C. § 522(d)(3)
	tablets, cell phones and assorted chargers and peripherals. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	clothing, shoes and clothing accessories	\$900.00		\$900.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	jewelry	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B				
	cash on hand Line from Schedule A/B: 16.1	\$100.00	\$100.00		11 U.S.C. § 522(d)(5)	
	Ente nom conceaute / v.b.			100% of fair market value, up to any applicable statutory limit		
	checking: estimated funds in bank account located at: CHASE	\$40.00		\$40.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	401k: retirement account held in trust by employer	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(12)	
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	Federal & State: pro rated tax refund and 2019 (if any)	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
	garnished wages Line from Schedule A/B: 35.1	\$800.00		\$800.00	11 U.S.C. § 522(d)(5)	
	Ellie Holli Gonedale A.B. 33.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 ■ No ■ Yes. Did you acquire the property covere ■ No ■ Yes	3 years after that for ca	ises fi	·		
	– 163					

Fill in this inform	nation to identify you	r case:				
Debtor 1	Theresa Elaine	Davis				
	First Name	Middle Name Last Na	me		-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Na	me		-	
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN				
Case number					_	c if this is an ded filing
Official Forn Schedule		Who Have Claims Secu	ıred	by Propert	у	12/15
		f two married people are filing together, both out, number the entries, and attach it to this fo				
1. Do any creditors	have claims secured by	your property?				
☐ No. Check	this box and submit th	his form to the court with your other schedu	les. You	ı have nothing else t	to report on this form.	
_	all of the information l	·				
		Jelow.				
Part 1: List Al	II Secured Claims			Column A	Column B	Column C
for each claim. If m	ore than one creditor has	nore than one secured claim, list the creditor separaticular claim, list the other creditors in Part 2 cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Credit Acc	ceptance Corp	Describe the property that secures the claim	1:	\$22,477.00	\$13,000.00	\$9,477.00
Creditor's Name	<u> </u>	2012 Dodge Charger 112000 miles	_	V22 ,411100		
Po Box 50 Southfield	070 d, MI 48086	As of the date you file, the claim is: Check all tapply. Contingent	hat			
Number, Street	, City, State & Zip Code	Unliquidated				
Who owes the de	eht? Check one	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only	orieck one.	☐ An agreement you made (such as mortgage	or secu	red		
Debtor 2 only		car loan)	01 00001			
Debtor 1 and De	ehtor 2 only	☐ Statutory lien (such as tax lien, mechanic's l	ien)			
	he debtors and another	☐ Judgment lien from a lawsuit	icii)			
Check if this cl	aim relates to a	Other (including a right to offset)				
	Opened					

Active

Date debt was incurred 8/30/19

4919

Last 4 digits of account number

Middle N	Last Name Describe the property that secures the clair	¢0 002 0		
Lending &	Describe the property that secures the clair	¢n non n		
		n: \$9,982.0	0 \$6,500.00	\$3,482.00
	2012 Lincoln MKS 185000 miles			
	apply.	that		
State & Zip Code	☐ Unliquidated			
Check one.	☐ Disputed Nature of lien. Check all that apply.			
	☐ An agreement you made (such as mortgag car loan)	e or secured		
2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
ebtors and another	☐ Judgment lien from a lawsuit			
relates to a	Other (including a right to offset)			
Opened 03/14 Last Active 9/30/19	Last 4 digits of account number	1207		
,	03/14 Last Active	apply. State & Zip Code Contingent Disputed Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgag car loan) 2 only Statutory lien (such as tax lien, mechanic's ebtors and another relates to a Other (including a right to offset) Opened 03/14 Last Active	A 92807 Contingent Contingent Disputed Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) 2 only Statutory lien (such as tax lien, mechanic's lien) ebtors and another relates to a Other (including a right to offset) Opened 03/14 Last Active	apply. State & Zip Code

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1	Theresa Elaine D	avis					
	First Name	Middle N	ame	Last Name			
Debtor 2 (Spouse if,		Middle N	ame	Last Name			
	-	EASTERNI	DISTRICT OF MIC	CHICAN			
Jillea S	tates Bankruptcy Court for the:	EASTERNI	DISTRICT OF WIN	SHIGAN			
Case nu	mber		_			- Obs.	Life data ta la la
ii Kilowii)						_	k if this is an ded filing
							3
	I Form 106E/F						4044
	Jule E/F: Creditors V						12/15
Schedule Schedule eft. Attacl	tory contracts or unexpired lease G: Executory Contracts and Unex D: Creditors Who Have Claims Se h the Continuation Page to this pacase number (if known). List All of Your PRIORITY U	pired Leases (O cured by Proper ge. If you have r	fficial Form 106G). ty. If more space is no information to r	Do not include any cred s needed, copy the Part y	itors with partially se ou need, fill it out, nu	cured claims that imber the entries	are listed in in the boxes on the
	ny creditors have priority unsecur						
_	o. Go to Part 2.	J.ao again	, .				
2. Li lis m	sts all of your priority unsecured c ted, identify what type of claim it is. I uch as possible, list the claims in alp age of Part 1. If more than one credi	f a claim has both habetical order a	n priority and nonpri- ccording to the cred	ority amounts, list that clair itor's name. If you have me	m here and show both	priority and nonpric	ority amounts. As
(F	or an explanation of each type of cla	im, see the instru	uctions for this form	in the instruction booklet.)	Total claim	Priority amount	Nonpriority amount
2.1.						amount	amount
		La	ast 4 digits of acco	unt number			
Ī	Priority Creditor's Name	w	hen was the debt i	ncurred?			
1	Number Street City State Zip Code	_	s of the date you fi Contingent	le, the claim is: Check all	that apply		
Who	o incurred the debt? Check one.] Unliquidated				
	Debtor 1 only		Disputed				
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	т.	pe of PRIORITY u	anner med alaim.			
	At least one of the debtors and anoth	iei <u>-</u>	Domestic support				
	ne claim subject to offset?	_	_				
	•			other debts you owe the g			
		_	_				
ы	res	<u>L</u>	Other. Specify				_
Part 2:	List All of Your NONPRIORI	TY Unsecured	Claims				
3. Do aı	ny creditors have nonpriority unse	cured claims ag	gainst you?				
□ N	o. You have nothing to report in this	part. Submit this	form to the court wit	h your other schedules.			
■ Ye	es.						
unse	all of your nonpriority unsecured of cured claim, list the creditor separate one creditor holds a particular claim,	ly for each claim.	. For each claim liste	ed, identify what type of cla	im it is. Do not list clair	ns already included	d in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 12

Debtor	1 Theresa Elaine Davis	Case number (if known)	
4.1	Amcol Systems Inc	Last 4 digits of account number	\$276.00
	Nonpriority Creditor's Name Po Box 21625 Columbia, SC 29221	When was the debt incurred? Opened 03/19	-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney Providence Hospital	-
4.2	American National Adjustment Corp.	Last 4 digits of account number	\$11,898.00
	Nonpriority Creditor's Name c/o Ralph K. Mayers PO BOX 251055	When was the debt incurred?	-
	Detroit, MI 48235 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify account stated	-
4.3	Beaumont Nonpriority Creditor's Name	Last 4 digits of account number	\$355.00
	PO BOX 5042 Troy, MI 48007-5002	When was the debt incurred? 2019	-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify account stated	-

Beaumont Health CRNA	Last 4 digits of account number	\$29.0
Nonpriority Creditor's Name PO BOX 675157 Detroit, MI 48267-5157	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify medical	
Beaumont Service Center	Last 4 digits of account number	\$75.0
Nonpriority Creditor's Name 26901 Beaumont Blvd. Southfield, MI 48033	When was the debt incurred? 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify medical	
Biotech Clinical Lab	Last 4 digits of account number	\$91.
Nonpriority Creditor's Name 25775 Meadowbrook Novi, MI 48375-1849	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify account stated	

1 Theresa Elaine Davis		Case number (if known)				
Capital One Bank Usa N	Last 4 digits of account number	6617	\$796.0			
Nonpriority Creditor's Name	_	One med 04/44 Least Active				
Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 01/14 Last Active 7/06/19				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No □ Debts to pension or profit-sharing plans, and other similar debts						
Yes	■ Other. Specify Credit Card	i				
Congress Collection	Last 4 digits of account number	2030	\$76.0			
Nonpriority Creditor's Name 28552 Orchard Lake Road	When was the debt incurred?	Opened 02/17				
Farmington Hills, MI 48334 Number Street City State Zip Code	As of the date you file, the claim	is. Check all that apply				
Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	2 only					
Debtor 1 and Debtor 2 only	Debtor 1 and Debtor 2 only					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
☐ Yes	■ Other. Specify Collection Group	Attorney University Physician				
Cred-O-Matic Finance Corp.	Last 4 digits of account number		\$551.3			
Nonpriority Creditor's Name 45735 Woodward Ave. Pontiac, MI 48341	When was the debt incurred?	2009				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.	•	,				
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only						
☐ At least one of the debtors and another	d claim:					
☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: , ☐ Student loans					
debt Is the claim subject to offset?		aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
□Yes	Other Specify account st	ntad				

Theresa Elaine Davis		Case number (if known)	
Credit Collection Serv	Last 4 digits of account number	7921	\$1,285.00
Nonpriority Creditor's Name Po Box 607 Norwood, MA 02062	When was the debt incurred?	Opened 05/19	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Progressive	
Diversified Consultant	Last 4 digits of account number	2219	\$1,340.00
Nonpriority Creditor's Name P O Box 551268 Jacksonville, FL 32255	When was the debt incurred?	Opened 07/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	□ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Collection	Attorney Sprint	
DTE Energy	Last 4 digits of account number	4451	\$4,131.66
Nonpriority Creditor's Name Attn: Bankruptcy Department One Energy Plaza 735 W.C.B.	When was the debt incurred?	2019	
Detroit, MI 48226	_		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	a ciaiii.	
☐ Check if this claim is for a community debt sthe claim subject to offset?		ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	■ Other Specify Utility bill		

Official Form 106 E/F

Theresa Elaine Davis		Case number (if known)	
Epic Primary Care	Last 4 digits of account number		\$229.0
Nonpriority Creditor's Name 3051 Momentum Place Chicago, IL 60689	When was the debt incurred?	2019	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	Student loans		
uebt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify medical		
First Premier Bank	Last 4 digits of account number	7023	\$889.0
Nonpriority Creditor's Name		Opened 08/15 Last Active	
3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	10/07/15 Last Active	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other Specify Credit Card		
First Premier Bank		3330	\$589.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ000.0
3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	Opened 06/14 Last Active 10/07/15	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
☐ Yes	■ Other. Specify Credit Card	İ	

Gateway One lending & Finance	Last 4 digits of account number	\$3,095.1
Nonpriority Creditor's Name 175 N. Riverview Dr. Anaheim, CA 92808	When was the debt incurred? 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify account stated	
Heidelberg Dermatology, PC	Last 4 digits of account number	\$51.0
Nonpriority Creditor's Name 20400 Livernois Avenue Detroit, MI 48221	When was the debt incurred? 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical	
Jefferson Capital Systems, LLC	Last 4 digits of account number	\$590.0
Nonpriority Creditor's Name 16 McLeland Saint Cloud, MN 56303	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify account stated	

Theresa Elaine Davis	Case number (if known)	
Lvnv Funding Llc	Last 4 digits of account number 9065	\$541.0
Nonpriority Creditor's Name C/o Resurgent Capital Services Greenville, SC 29602	When was the debt incurred? Opened 05/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you direport as priority claims 	d not
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify	
Midland Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$636.00
PO BOX 1628	When was the debt incurred? Opened 07/17	
Warren, MI 48090	_ 	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you di	d not
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify	
Progressive Leasing	Last 4 digits of account number	\$2,658.77
Nonpriority Creditor's Name NPRTTO Michigan, LLC 256 West Data Drive	When was the debt incurred? 2019	
Draper, UT 84020 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Offeck all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you direport as priority claims	d not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify account stated	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Theresa Elaine Davis	Case number (if known)	
Snap Finance	Last 4 digits of account number	\$450.0
Nonpriority Creditor's Name 1760 W. 2100 S #26561 Salt Lake City, UT 84199	When was the debt incurred?	
Number Street City State Zip Code Nho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify account stated	
Southfield Radiology Assoc. Nonpriority Creditor's Name	Last 4 digits of account number	\$16.20
44000 Garfield Road Clinton Township, MI 48038	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify account stated	
Surgery Specialists, Inc.	Last 4 digits of account number	\$158.00
Nonpriority Creditor's Name 28080 Grand River Ave Ste 204 Farmington, MI 48336	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
•	■ Other. Specify account stated	

Debtor	Theresa Elaine Davis		Case number (if known)	
4.2 5	Tbom/total Crd	Last 4 digits of account number	6926	\$466.00
	Nonpriority Creditor's Name	_	Opened 02/15 Last Active	
	Po Box 85710 Sioux Falls, SD 57118	When was the debt incurred?	5/19/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2	Trident Asset Manageme	Last 4 digits of account number	0096	\$675.00
	Nonpriority Creditor's Name 10375 Old Alabama Road Co	When was the debt incurred?	Opened 06/14	
	Alpharetta, GA 30022 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,	,	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Returned C	heck Star Lincoln	
4.2	Us Dept Of Ed/glelsi		8581	\$5,424.00
7	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ3,727.00
	2401 International Lane Madison, WI 53704	When was the debt incurred?	Opened 02/12 Last Active 9/30/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify		
		Educationa	ıl	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims Page 10 of 12

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Theresa Elaine Davis		Case number (if known)	
Name and Address 36th District Court 12-122125 421 Madison Street	On which entry in Part 1 or Part 2 Line 4.2 of (Check one):	did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Detroit, MI 48226	Last 4 digits of account number		
Name and Address 47th Judicial District Court GC 19 H076 31605 W. 11 Mile Road Farmington, MI 48336	On which entry in Part 1 or Part 2. Line 4.20 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
r armington, wii 40330	Last 4 digits of account number		
Name and Address Allied Interstate PO Box 1954	On which entry in Part 1 or Part 2 Line 4.19 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Southgate, MI 48195	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Elizabeth Smith, P-63010 PO BOX 2044 Warren, MI 48090-2044	On which entry in Part 1 or Part 2 Line 4.20 of (Check one):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
Trairon, IIII 40000 2044	Last 4 digits of account number		
Name and Address First Premier Bank P.O. Box 5524 Sioux Falls, SD 57117-5524	On which entry in Part 1 or Part 2 Line 4.18 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Par Group 39625 Lewis Drive Suite 200 Novi, MI 48377	On which entry in Part 1 or Part 2. Line 4.6 of (Check one):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
1101, 111 40077	Last 4 digits of account number		
Name and Address Ralph Mayers PO BOX 251055 West Bloomfield, MI 48325	On which entry in Part 1 or Part 2 Line 4.2 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Trest Biodifficia, Mi 40020	Last 4 digits of account number		

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 5,424.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 31,948.10

6j. Total Nonpriority. Add lines 6f through 6i.

\$ 37,372.10

Fill in this information to identify your case:								
Debtor 1								
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	PF MICHIGAN					
Case number (if known)					☐ Check if this is an			
					amended filing			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	-

Fill in this	s information	n to identify your	case:			
Debtor 1		neresa Elaine D	avis Middle Name	Last Name		
Debtor 2	1 113	st ivallie	Middle Name	Last Name		
(Spouse if, fi	iling) Fire	st Name	Middle Name	Last Name		
United Sta	ates Bankrup	tcy Court for the:	EASTERN DISTRICT (OF MICHIGAN		
Case num	mber					
(if known)						Check if this is an amended filing
Officia	al Form	106H				
Sched	dule H:	Your Cod	ebtors			12/15
people are fill it out, a your name	e filing toget and number e and case n	her, both are equ the entries in the umber (if known)	ally responsible for sup boxes on the left. Attac . Answer every question	plying correct information the Additional Page to	on. If more space is ne this page. On the top	te as possible. If two married seded, copy the Additional Page, of any Additional Pages, write
_	•	.,	, o a a. og a jo o a o o,	do not not ound, opoudo o		
■ No □ Ye	-					
				roperty state or territory uerto Rico, Texas, Washin		states and territories include
_					,	
	o. Go to line 3		use or local equivalent liv	a with you at the time?		
⊔ те	es. Dia your sp	oouse, former spot	use, or legal equivalent liv	e with you at the time?		
	п.,					
	□ No □ Yes.					
		-1	tit did ii 2		Fill in the manner and	d
	in whi	cn community state	e or territory did you live?		Fill in the name and	d current address of that person.
	City		State	Zip Code		
in lin Form	ne 2 again as n 106D), Sche Column 2.	a codebtor only i edule E/F (Official	f that person is a guara	ntor or cosigner. Make s	ure you have listed the G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fil
		our codebtor Street, City, State and ZI	P Code		Check all schedules	ditor to whom you owe the debt s that apply:
3.1					☐ Schedule D, line	
	Name				☐ Schedule E/F, lir	
					☐ Schedule G, line	
	Number City	Street	State	ZIP Code		
3.2					☐ Schedule D, line	
<u> </u>	Name				☐ Schedule E/F, lir	
					☐ Schedule G, line	
	Number	Street				
	City		State	ZIP Code		

Schedule H: Your Codebtors

Page 1 of 1
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19-54952-mar Doc 1 Filed 10/22/19 Entered 10/22/19 08:12:51 Page 35 of 60

Fill	in this information to id	entify your ca	ase:									
Del	otor 1 T	heresa Elai	ne Davis			_						
	otor 2					_						
Uni	ted States Bankruptcy	Court for the:	EASTERN DISTRICT	OF MICHIGAN								
	se number					k if this is: n amende						
_							□ A	suppleme	ent sho	wing postpet ne following o		chapter
0	fficial Form 1	<u>061</u>					M	M / DD/ Y	YYYY			
S	chedule I: Yo	our Inco	ome									12/15
spo atta	use. If you are separa	ted and you this form. (are married and not filing wi r spouse is not filing wi On the top of any addition	th you, do not include	infor	matio	on about	your spo	ouse. If	more space	e is n	eeded,
1.	Fill in your employn information.	nent		Debtor 1				Debtor 2	2 or no	n-filing spo	use	
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Employed				☐ Employed				
			Employment status	☐ Not employed				☐ Not employed				
	employers.		Occupation	team leader								
	Include part-time, sea self-employed work.	asonal, or	Employer's name	Amrock Inc.				-				
	Occupation may inclu or homemaker, if it ap		Employer's address	662 Woodward A Detroit, MI 48226	ve.							
			How long employed the	nere? 4 years				_				
Par	t 2: Give Details	s About Mon	thly Income									
	mate monthly income use unless you are sep		ate you file this form. If y	you have nothing to rep	ort for	any	line, write	s \$0 in the	space.	. Include you	r non-	-filing
	u or your non-filing spo e space, attach a sepa		ore than one employer, co	embine the information	for all e	emplo	oyers for	that perso	on on th	ie lines belov	w. If yo	ou need
							For Dek	otor 1		Debtor 2 or -filing spou		
2.			ry, and commissions (becalculate what the month)		2.	\$	5	,250.05	\$	N	N/A	
3.	Estimate and list me	onthly overti	me pay.		3.	+\$		0.00	+\$		N/A	
1	Calculate gross Inc.	omo Add lin	o 2 i lino 2		1	•	E 21	50 0E	•	NI/A	Λ.	

			For	Debtor 1	For Debto		
	Copy line 4 here	4.	\$	5,250.05	\$	N/A	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	429.56	\$	N/A	
	5b. Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	5c. Voluntary contributions for retirement plans	5c.	\$_	105.02	\$	N/A	=
	5d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	•
	5e. Insurance	5e.	\$	442.00	\$	N/A	
	5f. Domestic support obligations	5f.	\$	0.00	\$	N/A	-
	5g. Union dues	5g.	\$_	0.00	\$	N/A	
	5h. Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	976.58	\$	N/A	-
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,273.47	\$	N/A	_
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	8a.	\$	0.00	¢	NI/A	
	monthly net income.		* *	0.00	\$ \$	N/A	
	8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent	8b.	Φ_	0.00	Φ	N/A	
	8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d. Unemployment compensation	8d.	\$_	0.00	\$	N/A	
	8e. Social Security	8e.	\$_	0.00	\$	N/A	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g. Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h. Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	-
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	\
10	Calculate monthly income. Add line 7 + line 9.	10. \$		4,273.47 + \$	N/A	= \$	4,273.47
10.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ. Ψ		+,213.41 · Ψ_	11//	$\exists \exists \vdash =$	4,213.41
11.	State all other regular contributions to the expenses that you list in Schedul Include contributions from an unmarried partner, members of your household, you other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are no Specify:	our depen			ed in <i>Schedu</i>	le J. +\$	0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Ceapplies					\$	4,273.47
						Combin	
13.	Do you expect an increase or decrease within the year after you file this for No.	rm?				monthly	y income
	Yes. Explain:						
	_ ' ' _						

EIII	in this informa	tion to identify yo	our caca:			1		
	otor 1					Choo	k if this is:	
Dep	otor i	Theresa Elai	ne Davis	i <u> </u>			An amended filing	
	otor 2 ouse, if filing)							wing postpetition chapter the following date:
``		untey Court for the	· FASTE	RN DISTRICT OF MICHI	GAN		MM / DD / YYYY	
		upicy Court for tile.	LAGIL	THE BIOTHER OF MICHIE	<u>OAN</u>		WIWI / DD / TTTT	
	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your I						12/15
info	ormation. If m		eded, atta	. If two married people a ch another sheet to this n.				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to □ Yes. Doe		in a separ	ate household?				
	□ N □ Y	_	st file Offic	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of Debt	tor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state				Son		14	□ No
	dependents	names.			3011			■ Yes □ No
							<u> </u>	Yes
								□ No □ Yes
							<u> </u>	□ No
_	_							☐ Yes
3.	expenses of	enses include f people other th d your depende	han $_{m \Box}$	No Yes				
Est exp	imate your ex	ate Your Ongoin penses as of your date after the b	our bankr	uptcy filing date unless	you are using this for plemental Schedule	orm as a su J, check th	pplement in a Cha e box at the top o	apter 13 case to report of the form and fill in the
the		n assistance and		government assistance cluded it on <i>Schedule I:</i>			Your exp	enses
4	The rental o	r home owners	hin ovnor	soo for your residence	Indude first mentage			
4.		nd any rent for the		ses for your residence. or lot.	molude inst mortgage	4. \$		1,367.00
	If not includ	led in line 4:						
		estate taxes				4a. \$		0.00
	•	rty, homeowner's		's insurance ıpkeep expenses		4b. \$ 4c. \$		0.00
		maintenance, re owner's associat	•			4c. \$		20.00 0.00
5.	Additional r	nortgage payme	ents for yo	our residence, such as he	ome equity loans	5. \$		0.00

Official Form 106J

Schedule J: Your Expenses

19-54952-mar Doc 1 Filed 10/22/19 Entered 10/22/19 08:12:51 Page 39 of 60

Fill in this infor				
Debtor 1	Theresa Elaine D			
Dahtano	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	sankruptcy Court for the:	EASTERN DISTRIC	T OF MICHIGAN	
Case number				
(if known)				☐ Check if this is an amended filing
			al Debtor's Schedu	
. two married p	sopie are ming togethe	., both are equally les	pondible for aupprying confect illioni	iuuvii.
Vou muct file th	ie form whonover ver f	ilo hankruntov ochodu	los or amondod schodulos Making a	false statement, consecling property or
obtaining mone		n connection with a ba		false statement, concealing property, or to \$250,000, or imprisonment for up to 20
obtaining mone years, or both. 1	ey or property by fraud in	n connection with a ba		
obtaining mone years, or both.	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below	n connection with a ba		to \$250,000, or imprisonment for up to 20
obtaining mone years, or both. ?	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below	n connection with a ba	ankruptcy case can result in fines up	to \$250,000, or imprisonment for up to 20
obtaining mone years, or both. Sig	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below	n connection with a ba	ankruptcy case can result in fines up	to \$250,000, or imprisonment for up to 20
Did you pa	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below ay or agree to pay some	n connection with a ba	ankruptcy case can result in fines up	to \$250,000, or imprisonment for up to 20 forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Did you pa No Yes. Under penathat they are	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below ay or agree to pay some Name of person alty of perjury, I declare	n connection with a ba	torney to help you fill out bankruptcy ummary and schedules filed with this	to \$250,000, or imprisonment for up to 20 forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Did you pa No Yes. Under penathat they ar X /s/ The There	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct.	n connection with a ba	torney to help you fill out bankruptcy	to \$250,000, or imprisonment for up to 20 forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Did you pa No Yes. Under penathat they an X /s/ The Signatu	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct. eresa Elaine Davis esa Elaine Davis	n connection with a ba	torney to help you fill out bankruptcy ummary and schedules filed with this X Signature of Debtor 2	to \$250,000, or imprisonment for up to 20 forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fil	in this inform	nation to identify you	r case:			
	btor 1	Theresa Elaine I				
De	ו וטוטו	First Name	Middle Name	Last Name		
1 -	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
	se number				-	heck if this is an mended filing
St Be info	as complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
Pa		ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Га	Explai	ii the Sources of You	rincome			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	Ill businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$61,325.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

No.

☐ Yes

Go to line 7.

attorney for this bankruptcy case.

Del	btor 1 Theresa Elaine Davis		Cas	e number (if known)		
7.	Within 1 year before you filed for banks Insiders include your relatives; any gener of which you are an officer, director, perso a business you operate as a sole propriet alimony.	al partners; relatives of any gen on in control, or owner of 20% o	eral partners; partners r more of their voting	erships of which you	ou are a genera ny managing a	al partner; corporations agent, including one fo
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for banks insider? Include payments on debts guaranteed on No		ments or transfer a	ny property on a	ccount of a d	ebt that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pai	rt 4: Identify Legal Actions, Reposses	ssions, and Foreclosures				
9.	Within 1 year before you filed for bank List all such matters, including personal ir modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
	Midland Funding LLC v. Theresa Elaine Davis GC 19 H0767	collection	47th Judicial District Cot 31605 W. 11 Mile Road Farmington, MI 48336		■ Pending □ On appe □ Conclud	eal
	American National Adjustment Corp. v. Theresa Elaine Davis 12-122125	collection	36th District Co 421 Madison S Detroit, MI 482	treet	Pending On appe Conclud	eal
10.	Check all that apply and fill in the details I		erty repossessed, f	oreclosed, garnis	shed, attache	d, seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property Explain what happened	d .	Date		Value of the property
	American National Adjustment	wages			eekly	\$800.00
	Corp. c/o Ralph K. Mayers PO BOX 251055 Detroit, MI 48235	☐ Property was reposse ☐ Property was foreclos ☐ Property was garnish	sed. ed.	wag	es	
		☐ Property was attache	d, seized or levied.			

Official Form 107

11.	accounts or refuse to make a payment b No Yes. Fill in the details.		did any creditor, including a bank or financial ins you owed a debt?	titution, set off any a	imounts from your
	Creditor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o		as any of your property in the possession of an a error official?	ssignee for the bene	efit of creditors, a
	■ No □ Yes				
Par	t 5: List Certain Gifts and Contribution	ıs			
13.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift.	uptcy, o	lid you give any gifts with a total value of more th	nan \$600 per person	?
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or or		lid you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	total	Describe what you contributed	Dates you contributed	Value
Par					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster,
	Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	s			
16.	consulted about seeking bankruptcy or	preparii	d you or anyone else acting on your behalf pay on ga bankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Offices of Marshall D. Schultz 29777 Telegraph Road, Suite 2203 Southfield, MI 48034 marshalld.schultz@gmail.com		Attorney Fees	10/21/2019	\$250.00

Case number (if known)

Official Form 107

Debtor 1 Theresa Elaine Davis

17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No Yes Fill in the details.	s or to make payments			or transfer any proper	ty to anyone who
	☐ Yes. Fill in the details. Person Who Was Paid Address	Description and v transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but Include both outright transfers and transfers may include gifts and transfers that you have already No Yes. Fill in the details.	isiness or financial affa de as security (such as t	nirs? he granting of a s			
	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer			any property or received or debts change	Date transfer was made
 19. Within 10 years before you filed for bankruptcy, did you beneficiary? (These are often called asset-protection devices No Yes. Fill in the details. 			y property to a s	elf-settled tru	ust or similar device o	f which you are a
	Name of trust	Description and v	alue of the propo	erty transferr	ed	Date Transfer was made
Par 20.	8: List of Certain Financial Accounts, Inst Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc	, were any financial ac	counts or instru	ments held ir of deposit; sh		
	Yes. Fill in the details.					
		Last 4 digits of account number	Type of accour instrument	clo mo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details.	ear before you filed for	bankruptcy, any	<i>ı</i> safe deposi	t box or other deposit	ory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit of ■ No □ Yes. Fill in the details.	r place other than your	home within 1 y	ear before yo	ou filed for bankruptc	J?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Theresa Elaine Davis Case number (if known)

Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No	Par	t 9: Identify Property You Hold or Control for	Someone Else						
Yes. Fill in the details. Where is the property? Describe the property Value Address (humber, Street, City, State and ZIP Code) (Number, Street, City, S	23.		ne else owns? Include any prope	rty yo	ou borrowed from, are storing fo	, or hold in trust			
Owner's Name Address (humber, Street, City, State and ZIP Code) Where is the property? Where is the property of the property of the property of the property of the property in the property		_ 110							
Address (Number, Street, City, State and ZIP Code) (Number, Stree									
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you was be liable or potentially liable under or in violation of an environmental law? No			(Number, Street, City, State and ZIP	Des	scribe the property	Value			
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or properly as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material mass anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes, Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Numbe	Par	t 10: Give Details About Environmental Informa	ation						
toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No	For	the purpose of Part 10, the following definitions	apply:						
to own, operate, or utilize it, including disposal sites. Hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Num		toxic substances, wastes, or material into the ai	ir, land, soil, surface water, ground	_	•				
Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No	_	to own, operate, or utilize it, including disposal	sites.						
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) State and ZIP Code) Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Address (Number, Street,		, ,		s was	ste, hazardous substance, toxic :	substance,			
■ No	Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n the	y occurred.				
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State an	24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	e und	ler or in violation of an environm	ental law?			
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Ano State and ZIP Code) Ano State and ZIP Code) Another Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation									
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation			Address (Number, Street, City, State an	nd		Date of notice			
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case Status of the case Number Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business	25.								
Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation		_							
No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation			Address (Number, Street, City, State an	nd		Date of notice			
☐ Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ Apartner in a partnership ☐ An officer, director, or managing executive of a corporation	26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
☐ Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ Apartner in a partnership ☐ An officer, director, or managing executive of a corporation		■ No							
Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation		_							
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation			Name Address (Number, Street, City,	Nat	ture of the case				
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation	Par	t 11: Give Details About Your Business or Con	nections to Any Business						
 □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation 			-	ny of	the following connections to an	/ husiness?			
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation	21.	_				, business:			
☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation		<u> </u>			•				
☐ An officer, director, or managing executive of a corporation		_	(===) or miniou hability partiters:	p (L	· -· ,				
		_ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `							
		_	•						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Theresa Elaine Davis Case number (if known)

	No. None of the above applies. Go to Part 12.							
	lacksquare Yes. Check all that apply above and fill	in the details below for each business.						
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed					
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	cy, did you give a financial statement to a	nyone about your business? Include all financial					
	No							
	☐ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

Debtor	1 Theresa Elaine Davis		Case number (if known)
Part 12	2: Sign Below		
are true with a b	e and correct. I understand that ma		ents, and I declare under penalty of perjury that the answers operty, or obtaining money or property by fraud in connection up to 20 years, or both.
/s/ The	eresa Elaine Davis		
	sa Elaine Davis ure of Debtor 1	Signature of Debtor 2	
Date	October 21, 2019	Date	
Did you ■ No □ Yes	ı attach additional pages to <i>Your</i> S	Statement of Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
Did you	ı pay or agree to pay someone who	o is not an attorney to help you fill out	bankruptcy forms?
No			

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

United States Bankruptcy Court Eastern District of Michigan

In re	Theresa Elaine Davis		Case No.				
		Debtor(s)	Chapter	7			
		T OF ATTORNEY FOR DEBTOR(S) ANT TO F.R.BANKR.P. 2016(b)					
	The undersigned, pursuant to F.R.Bankr.P. 2016(b),	states that:					
1.	The undersigned is the attorney for the Debtor(s) in	this case.					
2.	The compensation paid or agreed to be paid by the I	Debtor(s) to the undersigned is: [Check o	ne]				
	[X] <u>FLAT FEE</u>						
	A. For legal services rendered in contemplate exclusive of the filing fee paid			900.00			
	B. Prior to filing this statement, received			250.00			
	C. The unpaid balance due and payable is			650.00			
	[] RETAINER						
	A. Amount of retainer received						
	B. The undersigned shall bill against the reta agreed to pay all Court approved fees and			urly rate schedule.] Debtor(s) have			
3.	\$335.00 of the filing fee has been paid.						
4.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]						
	 A. Analysis of the debtor's financial situation bankruptcy; B. Preparation and filing of any petition, school. C. Representation of the debtor at the meetin Preparation of the debtor in adversary 	edules, statement of affairs and plan whice g of creditors and confirmation hearing,	th may be ro	equired; ourned hearings thereof;			
	E. Reaffirmations;F. Redemptions;G. Other:	processings and only contested cuminap		,			
5.	See attached fee agreement By agreement with the debtor(s), the above-disclose see attached fee agreement	d fee does not include the following serv	ices:				
6.	The source of payments to the undersigned was from AXX Debtor(s)' earnings, was	n: ges, compensation for services performed ng the identity of payor)	I				
7.	The undersigned has not shared or agreed to share, v corporation, any compensation paid or to be paid ex		embers of th	ne undersigned's law firm or			
Dated:	October 21, 2019	/s/ Marsha					
		29777 Tele Southfield	D. Schultz es of Mars egraph Ro J. MI 48034	P38040 shall D. Schultz ad, Suite 2203			
Agreed:	/s/ Theresa Elaine Davis						
-	Theresa Elaine Davis						
	Debtor	Debtor					

CHAPTER 7 BANKRUPTCY

LEGAL SERVICES REPRESENTATION AND FEE AGREEMENT

The undersigned individual(s) hereby retains attorney, Marshall D. Schultz, ("Attorney") to file and represent Client(s) in a Chapter 7 Bankruptcy case, and agrees to pay Attorney a MAXIMUM agreed fee of \$_900_____plus costs including, but not limited to, the \$335.00 (if not waived) filing fee (or current fee) required to be paid to the U.S. Bankruptcy Court and any fee(s) incurred in retrieving credit or asset reports. This fee shall cover ONLY the following pre-petition and (quantum meriut) post-petition legal services provided in connection with the case as described below:

Please note: If all fees are not paid in full prior to filing Client understands and specifically agrees that:

Any Portion of the fee paid pre-filing shall cover:

- (1) Pre-petition consultations and analysis with Client regarding the Bankruptcy law as it relates to their particular situation, review of client provided documentation and review of Credit Reports and Public Records or commercially available Asset Reports.
- (2) Preparation of Bankruptcy Petition and Schedules, review of prepared pleadings, office consultation(s) with the client to execute pleadings and filing Client's Chapter 7 Petition and Schedules based on the information provided and attested to by Client.

Any Portion of the fee paid post-filing shall be paid as QUANTUM MERIUT HOURLY post-petition services in an amount not to exceed the maximum agreed fee listed above and shall cover:

- (1) Amendments of Chapter 7 Schedules and pleadings, but NOT if the Client's failure to provide complete or accurate information to Attorney causes the needed amendment.
- (2) Attending the initial Section 341 Meeting of Creditor and any other adjourned 341-7 hearing scheduled by the Court.
- (3) Client communications, including, but not limited to, e-mail, mail, telephone and office consultations related to the Bankruptcy filing.
- (4) Trustee, U.S. Trustee and Creditor communications, including, but not limited to, e-mail, mail, telephone and office consultations related to the Bankruptcy filing.
- (5) Pre-court preparation consultation.

Client agrees and understands that the balance of any fee not paid prior to filing shall be paid prior to section 341 First Meeting of Creditors. The balance of this fee shall be construed as a fee for quantum meriut hourly post-petition services described above.

Client further agrees that any payments toward the maximum agreed fee made prior to filing Client's Chapter 7 case are not refundable based on the required preparatory work and responsibility assumed by Attorney.

The client also agrees that it is Client's sole obligation and responsibility to provide all of the necessary information with respect to personal information, income, assets, and liabilities required to accurately complete the bankruptcy petition and schedules.

Client agrees to pay Attorney \$300.00 per hour for legal services which are required or requested by the client to be provided by Attorney in addition to the above-described services covered by the maximum agreed fee.

In the event the maximum agreed fee is not paid in full prior to filing, Client agrees to pay for ONLY QUANTUM MERIUT POST-PETITION SERVICES ON AN HOURLY BASIS up to the amount of the maximum agreed fee.

The client specifically agrees that unless Attorney agrees in writing, ATTORNEY IS NOT OBLIGATED TO DEFEND ANY ADVERSARY PROCEEDING OR CONTESTED MATTER filed against Client contesting the discharge of any debt or contesting the granting of a Discharge to Client by the Bankruptcy Court. Client understands that before Attorney will agree to defend any Adversary Proceeding or Contested Matter, Attorney will require advance payment of an adequate retainer fee, and will require that Client agree to pay \$300.00 per hour for legal services to be provided in connection with such defense.

The client specifically agrees that the Attorney will NOT represent Client in any matter regarding the Client's relationship with any credit reporting agency or the information contained on any credit bureau report for a client or any co-debtor affected by client's bankruptcy or client's relationship with any utility companies or post-filing creditors.

Client understands that the Attorney may be faced with a calendar conflict on certain dates. Client consents to the appearance of associate counsel or of-counsel to conduct this hearing if the Attorney is faced with such a conflict. Client agrees that if Client is absent from the originally scheduled first meeting of creditors and a new hearing date is scheduled Client shall pay \$200.00 in fees for the additional post-petition court appearance.

Client understands that if Attorney recovers any pre-petition garnishment of wages or bank accounts the Attorney shall be compensated for this additional time and services in an amount equal to 33% of the monies recovered.

Client understands that one copy of the petition and schedules will be provided by the Attorney to the Client free of charge. Client agrees that reasonable retrieval and copying fee will be charged for any additional copies of the petition and or other documents requested by the Client that are contained in the Client's file.

Client agrees that all fees not paid prior to the filing of the Bankruptcy
Petition are fees for POST-PETITION services only.

By signing this Legal Services Representation and Fee Agreement, Client agrees to all the terms and conditions hereof and certifies that he and/or she has read and understands this entire Agreement

Client/Debtor Client/Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	Theresa Elaine Davis		Case No.						
		Debtor(s)	Chapter	7					
	VERIFICATION OF CREDITOR MATRIX								
Γhe abo	ove-named Debtor hereby verifies th	at the attached list of creditors is true and co	orrect to the best	of his/her knowledge.					
Date:	October 21, 2019	/s/ Theresa Elaine Davis							
		Theresa Elaine Davis							
		Signature of Debtor							

36th District Court 12-122125 421 Madison Street Detroit, MI 48226

47th Judicial District Court GC 19 H076 31605 W. 11 Mile Road Farmington, MI 48336

Allied Interstate PO Box 1954 Southgate, MI 48195

Amcol Systems Inc Po Box 21625 Columbia, SC 29221

American National Adjustment Corp. c/o Ralph K. Mayers PO BOX 251055 Detroit, MI 48235

Beaumont PO BOX 5042 Troy, MI 48007-5002

Beaumont Health CRNA PO BOX 675157 Detroit, MI 48267-5157

Beaumont Service Center 26901 Beaumont Blvd. Southfield, MI 48033

Biotech Clinical Lab 25775 Meadowbrook Novi, MI 48375-1849

Capital One Bank Usa N Po Box 30281 Salt Lake City, UT 84130

Congress Collection 28552 Orchard Lake Road Farmington Hills, MI 48334 Cred-O-Matic Finance Corp. 45735 Woodward Ave. Pontiac, MI 48341

Credit Acceptance Corp Po Box 5070 Southfield, MI 48086

Credit Collection Serv Po Box 607 Norwood, MA 02062

Diversified Consultant P O Box 551268 Jacksonville, FL 32255

DTE Energy Attn: Bankruptcy Department One Energy Plaza 735 W.C.B. Detroit, MI 48226

Elizabeth Smith, P-63010 PO BOX 2044 Warren, MI 48090-2044

Epic Primary Care 3051 Momentum Place Chicago, IL 60689

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

First Premier Bank P.O. Box 5524 Sioux Falls, SD 57117-5524

Gateway One Lending & 3818 E Coronado Anaheim, CA 92807

Gateway One lending & Finance 175 N. Riverview Dr. Anaheim, CA 92808

Heidelberg Dermatology, PC 20400 Livernois Avenue Detroit, MI 48221

Jefferson Capital Systems, LLC 16 McLeland Saint Cloud, MN 56303

Lvnv Funding Llc C/o Resurgent Capital Services Greenville, SC 29602

Midland Funding LLC PO BOX 1628 Warren, MI 48090

Par Group 39625 Lewis Drive Suite 200 Novi, MI 48377

Progressive Leasing NPRTTO Michigan, LLC 256 West Data Drive Draper, UT 84020

Ralph Mayers PO BOX 251055 West Bloomfield, MI 48325

Snap Finance
1760 W. 2100 S #26561
Salt Lake City, UT 84199

Southfield Radiology Assoc. 44000 Garfield Road Clinton Township, MI 48038

Surgery Specialists, Inc. 28080 Grand River Ave Ste 204 Farmington, MI 48336

Tbom/total Crd Po Box 85710 Sioux Falls, SD 57118 Trident Asset Manageme 10375 Old Alabama Road Co Alpharetta, GA 30022

Us Dept Of Ed/glelsi 2401 International Lane Madison, WI 53704